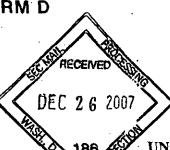
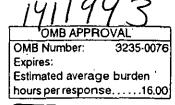
FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION





	U/UB/414
Name of Offering Thick if this is an amendment and name has changed, and indicate change.  P. Wild Mountain #1. I.I.C.	)
	·
Filing Under (Check box(es) that apply): Rule 504 X Rule 505 Rule 506 Section Type of Filing. New Filing Amendment	1 4(6) ULOE
Type of Filing. New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
P <sup>3</sup> Wild Mountain #1, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Co	de) Telephone Number (Including Area Code)
301 S. College St., Ste, 2600, Charlotte, NC 28202-603	
Address of Principal Business Operations (Number and Street, City, State, Zip C (if different from Executive Offices)	<del></del>
Brief Description of Business	
	·
Land Banking	
Type of Business Organization	PROCESSED
	her (please specify);
	nited liability app #12008
Actual or Estimated Date of Incorporation or Organization: [OTB] [OT7] [X] Actual	n Y
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for	
CN for Canada, FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	
Federal:	
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulati	on D or Section 4(6) 17 CFR 230 501 et sea or 15 U.S.C

77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to tile notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to tile the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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Enter the information requested for	or the following:		,					
<ul> <li>Each promoter of the issuer,</li> </ul>	if the issuer has	been organized wit	hin the past five 3	cars;				•'
<ul> <li>Each beneficial owner having</li> </ul>	the power to vo	te or dispose, or dire	et the vote or dispe	osition of, 10	% or more of	a class	of equity securities	of the issue
<ul> <li>Each executive officer and d</li> </ul>	irectar of carpio	rate issuers and of c	orporate general a	nd managing	partners of (	partner	ship issuers; and	•
<ul> <li>Each general and managing  </li> </ul>	partner of partne	ership issuers.		,				•
Check Box(es) that Apply: X Pro	moter [] I	Beneficial Owner	Executive O	fficer	Director	0	General and/or Managing Partner	
Bosworth, David B. Full Name (Last name first, if individu	al)		<del></del>			····	<del></del>	<u> </u>
17725 Langston Drive	e, Charlo	tte, NC 28	278			•		
Business of Residence Address (Num	iber and Street,	City, State, Zip Co.	ic)					
Check Box(es) that Apply: X Pro	omoter 🔲 I	Beneficial Owner	Executive C	fficer	Director		General and/or Managing Partner	
LaFave, David Full Name (Last name first, if individu	ıal).	<del> </del>		<del></del> -		•		
2229 Malvern Road		·	•				<del></del>	<u></u>
Business or Residence Address (Nun Charlotte, NC 2820	•	City, State, Zip Co	de)	· · · · · · · · · · · · · · · · · · ·				
Check Box(es) that Apply: X Pro	omoter [	Beneficial Owner	Executive C	Officer	Director		General and/or Managing Partner	
Smith, Stephen L. Full Name (Last name first, if individu	· · · · · · · · · · · · · · · · · · ·			<u>·</u>	<del></del>	<del></del> .	<u> </u>	
•	•		The NC 2	8202-60	1 g		•	
301 S. College St., Business or Residence Address (Nur				0202-00.	30		<del></del>	<del></del>
		Only, Brain, Sip of	:	•	-			
Check Box(es) that Apply: Pr	omoter .	Beneficial Owner	Executive (	Officer 📗	Director		General and/or Managing Partner	:
Full Name (Last name first, if individual	ual)	<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>	<del>.</del>		<del></del>	····
	. ·		•			٠,		
Business or Residence Address (Nur	nber and Street,	City, State, Zip Co	de)					
Check Box(es) that Apply: Pr	omoter [	Beneficial Owner	Executive (	Officer	Director	Π.	General and/or Managing Partner	
Full Name (Last name first, if individ-	ual)	· · · · · · · · · · · · · · · · · · ·	<u> </u>			<u> </u>	·	·
Business or Residence Address (Nu	mber and Street	, City, State, Zip Co	de)		<u></u> .		<u> </u>	<del></del>
Check Box(es) that Apply: . Pr	amoter	Beneficial Owner	Executive (	Officer [	Director		General and/or Managing Partner	· · · · · · · · · · · · · · · · · · ·
Full Name (Last name first, if individ	ual)			<u>. · · · · · · · · · · · · · · · · · · ·</u>	<del></del> -			
Business or Residence Address (Nu	mber and Street	, City, State, Zip Co	ode)					· ·
Check Box(es) that Apply: Pr	omoter	Beneficial Owner	Executive (	Officer [	Director		General and/or Managing Partner	<del></del>
Full Name (Last name first, if individ	ual) .		· · · · · · · · · · · · · · · · · · ·					,
Business or Residence Address (Nu	mber and Street	City, State. Zin Co	ode)	<u> </u>	<del></del> .		<del></del>	
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	(Use blank she	et, or copy and use	additional copies	of this sheet,	as necessar)	<i>r</i> )		

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,	Unatha	:	34	. • <del>.</del> .	4				41.1 56	. ~?		Yes	No 🚍
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?													
_	•••											•••	
2.	2. What is the minimum investment that will be accepted from any individual?								*************		,300		
3,	Does the	offering :	nermit ioint	ownershir	n of a sing	le unit?					:	Yes Ma	No
4.				•	-	ho has been						_	· 1=1
7.													
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering.  If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such													
						ore than rive on for that l				nated perso	ous or such	•	,
Ful			first, if indi							· · · · · · · · · · · · · · · · · · ·			
	N/A		•	,	•								
Bus	siness or l	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)				-		
			···						<del> </del>		·		· · · · · · · · · · · · · · · · · · ·
Nar	me of Ass	ociated Br	oker or De	aler								٠.	•
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers				<del></del>	<u> </u>	<del></del>
	•		•									□ AI	1 States
	AL	[AK]	AZ	AR	CA	CO	CT	DE	[DC]	[FL]	[GA]	HI	ID
	IL	ĪN	IA	(KS)	KY	LA	ME	MD	MA	MI	MN	MS).	MO
	MT	NE	NV	NH	NJ	NM	NY	NC)	ND .	OH	OK	OR	PA
	RI	(SC)	SD	TN	TX	UT	VT	VA	WA	WV)	WI	WY	PR
Ful	l Name (I	ast name	first, if ind	ividual)			<del> </del>		•	<del> </del>		· · · · · · · · · · · · · · · · · · ·	
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State, 2	Zip Code)						· ·
Nin		opioted De	oker or De	-1			<del></del>			<del>,</del> -			
1491	ine of Ass	ociated Bi	oker or De	aler									
Sta	tes in Wh	ich Person	Listed Ha	s Solicited	or Intends	to Solicit I	urchasers			<del></del>	<del></del>		
	(Check	"All State:	or check	individual	States)		**********		*********			☐ A	1 States
	AL	AK	AZ	[مم]	CA	ത്ര	CT	DE	. (DC)	FL	GA	HI	(di
			IA	(AR)	KY	CO LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH)	NJ.	NM	NY	NC	ND	OH	ŌK)	OR	PA
	RI	SC	SD	TN	1X	UT	VT	VA	WA	$\overline{WY}$	WI	WY	PR
Ful	ll Name (	Last name	first, if ind	ividual)					· <del>- · · · · · · · · · · · · · · · · · · </del>	· · · · · · · · · · · · · · · · · · ·	<del></del>		
				·	·-				·				
Bu	siness or	Residence	Address (	Number an	d Street, (	City, State,	Zip Code)	-	•				
Na	me of Ass	ociated B	roker or De	aler				<u> </u>		<u> </u>			, <u>, , , , , , , , , , , , , , , , , , </u>
Sta	tes in Wh	ich Persor	Listed Ha	s Solicited	or Intend	s to Solicit	Purchasers					<del></del>	<del></del>
	(Check					······································			************	************		A	ll States
	AL	[AK]	AZ	[AR]	CA	CO	[CT]	DE	DC	FL	GA	ĤĪ	<u>aı</u>
		IN	ĪĀ	KS	KY	LA	ME	MD	MA	- MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	(ND)	<b>OH</b>	OK)	OR	PA
	RI	(SC)	SD	TN	TX	UT	$\nabla T$	VA	WA	$[\overline{W}\overline{V}]$	WI	WY	PR

### c. offering price: number of investors, expenses and use of proceeds ::

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, chec this box and indicate in the columns below the amounts of the securities offered for exchange an already exchanged.	k d	
	Type of Security	Aggregate Offering Price	Amount Aiready Sold
	Debt	\$	<b>\$</b>
	Equity	\$	\$
	Common Preferred		
	Convertible Securities (including warrants)	\$	<b>s</b>
	Partnership Interests	\$	\$`
	Other (Specifylimited liability company interests	\$1,744,198	§ 102,600
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	•	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicat the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	e	
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3:	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities old by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505 membership	interest	\$1,231,200
	Regulation A		\$
	Rule 504		\$
	Total	*	\$1,231,200
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure in not known, furnish an estimate and check the box to the left of the estimate.	<b>e</b> ·	
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	<b>r</b>	\$ 5,700
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify) see attached		\$ 15,498
	Total		s 21,198

# Attachment to 4a: Other Expenses

Surveying	\$6,000
Misc/Insurance	\$2,100
Web Site	\$2,500
Other	\$3,600
Liability Insurance	\$126
Real Estate Taxes	<u>\$1,172</u>
Total	\$15,498

	and total expenses furnished in response to Part C — Question 4.a. This difference is the "ad proceeds to the issuer."		<u>s</u> 1,723,000
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to each of the purposes shown. If the amount for any purpose is not known, furnish an e check the box to the left of the estimate. The total of the payments listed must equal the adproceeds to the issuer set forth in response to Part C — Question 4.b above.	stimate and	
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		- 🗆 \$
	Purchase of real estate	<b>S</b>	□\$1,723,000
	Purchase, rental or leasing and installation of machinery and equipment	<b>s</b>	
	Construction or leasing of plant buildings and facilities	\$	s
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	<b>\$</b>	
	Repayment of indebtedness	<del></del>	
	Working capital	<b>s</b>	
	Other (specify):		s
		\$	_ 🗆 \$
	Column Totals	s <u>.</u>	$ \square$ $s^1$ ,723,000
	Total Payments Listed (column totals added)		,723,000
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sig	te issuer has duly caused this notice to be signed by the undersigned duly authorized person. Instruction constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchain information furnished by the issuer to any non-accredited investor pursuant to paragrap	If this notice is filed under R nge Commission, upon writt	
Iss	suer (Print or Type) Signature	Date	
P	3 Wild Mountain #1, LLC	mV1 12/20	107
Na	me of Signer (Print or Type) Title of Signer (Print of Type)		
	tephen L. Smith Manager of Manager		

- ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No <b>M</b>
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is f D (17 CFR 239.500) at such times as required by state law.	iled a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informatissuer to offerees.	ion furr	nished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entimited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claim		

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature
P3 Wild Mountain #1, LLC	12/2000
Name (Print or Type)	Title (Rright or Type)
Stephen L. Smith	Manager of Manager

<sup>\*</sup>only current compensation to affiliates of promoters is 2 acres of land

of this exemption has the burden of establishing that these conditions have been satisfied.

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

					46年46年	· · · · · · · · · · · · · · · · · · ·		2.2	
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	4  Type of investor and amount purchased in State  (Part C-Item 2)					ification te ULOE attach ition of granted) Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ					·	-			
AR						-			
CA									
co			·						
СТ									
DE									
DC					; <u> </u>				
FL									
GA	Х		1,744,198 limited	1	102,600	0			X
HI			liability company						
ID			interest						
IL									
IN									
IA					·		·		
KS									
KY									
LA									
ME					<u> </u>				
MD									
MA									
MI									
MN									
MS									

1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqual under Sta (if yes, explana waiver (Part E-	attach attion of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО					-		~-		·
· MT					,				
NE				·					
. NV									
NH					:				
, NJ						. , ,			
NM		·			·				
NY									
NC	Х		\$1,744,198 limited	9	923,400	2,	153,900		X
. ND			liability company				<i>:</i>		
ÓН			interest		1				
OK							·		
OR	`.								
PA									
RI				,					
.sc.						, .	· ·		
SD						·			
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VA				<u> </u>					
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				<u> </u>						
1			Type of security	· .				1	ate ULOE	
	Inten	l to sell	and aggregate		• .			(if yes, attach		
	J .	eccredited	offering price			investor and		explanation of waiver granted)		
	i i	s in State	offered in state		amount purchased in State					
L.	(Part E	3-Item 1)	(Part C-Item I)	· ·	(Part C-Item 2)					
				Number of		Number of	•		·	
		·		Accredited		Non-Accredited				
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No-	
WY							,			
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PR			]							
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